Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	About Debtor 2 (Spous	
1.	Your full name				
	Write the name that is on your government-issued	Christopher First name	First name	First name	
	picture identification (for example, your driver's			, we want	
	license or passport).	Middle name	Middle name	Middle name	
	Bring your picture identification to your meeting with the trustee.	Davila  Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr	
	meeting with the trustee.				
2.	All other names you have used in the last 8 years	,			
	Include your married or maiden names.				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9807			

Dei	Chinstopher Davile	1	Case Humber (II known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		1450 Gateway Blvd., 3M Far Rockaway, NY 11691	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Queens	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

DUD	otor 1	Christopher Davila	1				Case number (if known)		
Part	t 2:	Tell the Court About \	our Bank	ruptcy Cas	se				
7.	Bank	chapter of the ruptcy Code you are sing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	CHOC	sing to me under	Chapt	ter 7					
			☐ Chapt	ter 11					
			☐ Chapt	ter 12					
			☐ Chapt	ter 13					
8.	How	you will pay the fee	abo ord a p	out how you ler. If your a re-printed a	u may pay. Typica attorney is submitt address.	ally, if you are paying the fee y ting your payment on your bel	eck with the clerk's office in your local concerns of the concerns of the cash, cashie half, your attorney may pay with a credition, sign and attach the Application for	er's check, or money it card or check with	
						Official Form 103A).	non, sign and attach the Application for	maividuals to r dy	
			but app	is not requolies to you	iired to, waive you r family size and y	ır fee, and may do so only if y you are unable to pay the fee	on only if you are filing for Chapter 7. B your income is less than 150% of the of in installments). If you choose this opti- ficial Form 103B) and file it with your pe	ficial poverty line that on, you must fill out	
		you filed for	■ No.						
		nkruptcy within the t 8 years?	☐ Yes.						
				District		When	Case number		
				District		When	Case number		
				District		When	Case number		
10.		ny bankruptcy s pending or being	■ No						
	filed not f you,	by a spouse who is ling this case with or by a business er, or by an	☐ Yes.						
				Debtor			Relationship to you		
				District		When	Case number, if known		
				Debtor			Relationship to you	-	
				District		When	Case number, if known		
11.		ou rent your ence?	■ No.	Go to lir	ne 12.				
	. 55.0		☐ Yes.	Has you	ur landlord obtaine	ed an eviction judgment again	nst you?		
					No. Go to line 12.				
					Yes. Fill out <i>Initia</i> this bankruptcy po		n Judgment Against You (Form 101A) a	and file it as part of	

Deb	otor 1 Christopher Davil	a			Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Own a	s a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to P	art 4.	
	audinoce.	☐ Yes.	Name a	nd location of busi	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name o	f business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number	, Street, City, State	e & ZIP Code
	it to this petition.		Check t	he appropriate box	k to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
					(as defined in 11 U.S.C. § 101(6))
			_	None of the above	· · · · · · · · · · · · · · · · · · ·
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?	proceed you are o	under Subc choosing to statement,	hapter V so that it proceed under Sub	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C.
	For a definition of small	■ No.	I am no	t filing under Chapt	ter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filir Code.	ig under Chapter 1	1, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
Par	Penort if You Own or	Have An	, Hazardou	s Property or Any	Property That Needs Immediate Attention
			Tiazai dou	31 Toperty of Ally	Troperty That Needs infinediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	■ No. □ Yes.	What is the	e hazard?	
	public health or safety?				
	Or do you own any property that needs immediate attention?			te attention is hy is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is t	he property?	
	<b>0</b>				Number, Street, City, State & Zip Code

Debtor 1 Christopher Davila Case number (if known)

Part 5: Explain Your Efforts

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Christopher Davil	а		Case number	(if known)
Par	t 6: Answer These Quest	ions for R	eporting Purposes		
16.	What kind of debts do you have?	16a.	Are your debts primarily consindividual primarily for a person	sumer debts? Consumer debts are defir al, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		ness debts? Business debts are debts t ment or through the operation of the busin	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you owe	that are not consumer debts or business	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do gare paid that funds will be available	you estimate that after any exempt properble to distribute to unsecured creditors?	erty is excluded and administrative expenses
	administrative expenses are paid that funds will		■ No		
	be available for distribution to unsecured creditors?		Yes		
18.	How many Creditors do	<b>1</b> -49		□ 1,000-5,000	□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	<b>5</b> 0,001-100,000
		□ 100-1 □ 200-9		□ 10,001-25,000	☐ More than100,000
19.	How much do you	<b>\$</b> 0 - \$	50 000	□ \$1,000,001 - \$10 million	□ \$500.000.001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	million ☐ \$1,000,000,001 - \$10 billion 0 million ☐ \$10,000,000,001 - \$50 billion 00 million ☐ More than \$50 billion
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?	<b>\$50,0</b>	001 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
Par	t 7: Sign Below				
For	you	I have ex	amined this petition, and I declar	e under penalty of perjury that the inform	nation provided is true and correct.
				am aware that I may proceed, if eligible, of available under each chapter, and I ch	
				pay or agree to pay someone who is not notice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this
		I request	relief in accordance with the cha	pter of title 11, United States Code, spec	ified in this petition.
		bankrupt and 3571	cy case can result in fines up to \$1.	oncealing property, or obtaining money or \$250,000, or imprisonment for up to 20 years.	r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Christo	stopher Davila pher Davila e of Debtor 1	Signature of Debtor	2
		Executed	August 5, 2020 MM / DD / YYYY	Executed on MM	/ DD / YYYY

Debtor 1 Christopher Davi	la	Cas	Case number (if known)		
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Un	ited States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applicable schedules filed with the petition is incorrect.		vledge after an inquiry that the information in the		
	/s/ Jesus J. Pena	Date	August 5, 2020		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Jesus J. Pena				
	Printed name				
	Peña & kahn, PLLC.				
	88-19 Roosevelt Avenue				
	2nd Floor				
	Jackson Heights, NY 11372				
	Number, Street, City, State & ZIP Code				
	Contact phone <b>718-779-6961</b>	Email address	gsuarez@penakahn.com		
	2155463 NY				
	Bar number & State				

Fill	in this information to identify your case:		
Del	otor 1 Christopher Davila		
Del	First Name Middle Name Last Name		
	use if, filing) First Name Middle Name Last Name		
Uni	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK		
	se number	_	if this is an ed filing
Su	ficial Form 106Sum  mmary of Your Assets and Liabilities and Certain Statistical Information		2/15
info	es complete and accurate as possible. If two married people are filing together, both are equally responsible rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amer original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your as Value of	sets what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,800.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	10,800.00
Par	t 2: Summarize Your Liabilities		
		Your lia Amount	<b>bilities</b> you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	. \$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	81,188.00
	Your total liabilitie	\$	81,188.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,444.20
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,350.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your content of	our other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	or a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check to the court with your other schedules.	his box and su	bmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 1 Christopher Davila Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,800.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	18,911.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	18,911.00

Debtor 1	ormation to identify your cast	se and this filing:			
	Christopher Davila				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States F	Bankruptcy Court for the: E	ASTERN DISTRICT OF NEW YO	)RK		
Office Otates E	Zariki aptoy Court for the	TOTAL MANAGEMENT OF THE WAY	7111		
Case number					☐ Check if this is an amended filing
					amended ming
Official E	orm 106A/B				
_					
	lle A/B: Prope	rty ems. List an asset only once. If an			12/15
hink it fits best. Information. If mo Answer every que	Be as complete and accurate a ore space is needed, attach a s estion.	as possible. If two married people a eparate sheet to this form. On the t and, or Other Real Estate You Own	are filing together, both are top of any additional pages	equally responsible for s	pplying correct
•	, , , ,	terest in any residence, building, la	.na, or similar property?		
No. Go to Pa	art 2.				
☐ Yes. Where	e is the property?				
Part 2: Describ	oe Your Vehicles				
□ No ■ Yes					
3.1 Make:	Toyota	Who has an interest in the p	property? Check one		aims or exemptions. Put
Model:	Prius	Debtor 1 only			ed claims on Schedule D: ims Secured by Property.
Year:	2014	Debtor 2 only		Current value of the	Current value of the
Approxima Other info	nate mileage: 10500		•	entire property?	portion you own?
Othermio	minauori.	At least one of the debtors	and another		
				\$4,900.00	
		Check if this is commun (see instructions)		Ψ+,000.00	\$4,900.00

Debtor 1	Christopher	Davila	Case number (if known)	
	ehold goods and t ples: Major appliar	urnishings ices, furniture, linens, china, kitchenware		
	s. Describe			
		Furniture		\$2,500.00
□ No	ples: Televisions a	nd radios; audio, video, stereo, and digital equipm phones, cameras, media players, games	ent; computers, printers, scanners; music coll	ections; electronic devices
		TV		\$800.00
		1		
		Computer		\$500.00
Exam <sub>i</sub> ■ No	other collecti	figurines; paintings, prints, or other artwork; book ons, memorabilia, collectibles	s, pictures, or other art objects; stamp, coin, o	r baseball card collections;
9. <b>Equip</b> i Exam <sub>i</sub> ■ No	ment for sports a ples: Sports, photo musical instr s. Describe	graphic, exercise, and other hobby equipment; bid	cycles, pool tables, golf clubs, skis; canoes an	d kayaks; carpentry tools;
■ No		s, shotguns, ammunition, and related equipment		
☐ No	<i>mples:</i> Everyday cl	othes, furs, leather coats, designer wear, shoes, a	ccessories	
■ Yes	s. Describe			
		clothing		\$2,000.00
☐ No		welry, costume jewelry, engagement rings, weddir	ng rings, heirloom jewelry, watches, gems, gol	d, silver \$100.00
Exar ■ No □ Yes	farm animals  nples: Dogs, cats,  s. Describe	birds, horses d household items you did not already list, inc	luding any health aids you did not list	

De	ebtor 1	Christophe	er Davila		Case number (if known)	
15				Part 3, including any entries for pages	s you have attached	\$5,900.00
Pa	rt 4: De	scribe Your Fina	nncial Assets			
			legal or equitable interest	in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No		u have in your wallet, in your	home, in a safe deposit box, and on hand	d when you file your petition	n
17.				ecounts; certificates of deposit; shares in one of the same institution, list each.	credit unions, brokerage ho	ouses, and other similar
				Institution name:		
18.			s, or publicly traded stocks s, investment accounts with I	brokerage firms, money market accounts		
			Institution or issue	er name:		
19.		ublicly traded s enture	stock and interests in inco	rporated and unincorporated business	es, including an interest	in an LLC, partnership, and
	■ No					
	☐ Yes.	Give specific in	nformation about them Name of entity:		% of ownership:	
20.	Negoti	iable instrumen	ts include personal checks, c	gotiable and non-negotiable instrument ashiers' checks, promissory notes, and mutransfer to someone by signing or delivering the someone someone someone someone someone some some some some some some some som	noney orders.	
	■ No					
	☐ Yes.	Give specific in	formation about them Issuer name:			
21.		ment or pension ples: Interests in		, 403(b), thrift savings accounts, or other	pension or profit-sharing p	lans
		List each accou	unt separately.  Type of account:	Institution name:		
22.	Your s Examp	share of all unus		so that you may continue service or use f tt, public utilities (electric, gas, water), tele		es, or others
	■ No □ Yes.			Institution name or individual:		
23.	_	ties (A contract	for a periodic payment of mo	oney to you, either for life or for a number	of years)	
	■ No □ Yes		Issuer name and description.			
24.	26 U.S.		tion IRA, in an account in a , 529A(b), and 529(b)(1).	qualified ABLE program, or under a q	ualified state tuition prog	ıram.
	■ No □ Yes	1	Institution name and descript	ion. Separately file the records of any inte	erests.11 U.S.C. § 521(c):	
25.		, equitable or f	uture interests in property	(other than anything listed in line 1), a	nd rights or powers exer	cisable for your benefit
	■ No □ Yes.	Give specific in	nformation about them			

De	ebtor 1	Christopher Davila	Case number (if known)	
26.	_Examp	, copyrights, trademarks, trade secrets, and other intellectual property les: Internet domain names, websites, proceeds from royalties and licensing agree	eements	
	■ No □ Yes.	Give specific information about them		
27.		es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative association holdings, liquor	r licenses, professional licenses	
	☐ Yes.	Give specific information about them		
M	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu	unds owed to you		
	■ No □ Yes. 0	Give specific information about them, including whether you already filed the retu	irns and the tax years	
29.	Family : Examp	support les: Past due or lump sum alimony, spousal support, child support, maintenance	, divorce settlement, property se	ettlement
		Give specific information		
30.		mounts someone owes you les: Unpaid wages, disability insurance payments, disability benefits, sick pay, va benefits; unpaid loans you made to someone else	acation pay, workers' compens	ation, Social Security
	■ No □ Yes.	Give specific information		
31.	_Examp	s in insurance policies les: Health, disability, or life insurance; health savings account (HSA); credit, hor	meowner's, or renter's insurance	9
	■ No □ Yes. N	Name the insurance company of each policy and list its value.		
		Company name: Ber	neficiary:	Surrender or refund value:
32.	If you a someon	erest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life insurance policy, one has died.  Give specific information	or are currently entitled to receiv	e property because
	Examp ■ No	against third parties, whether or not you have filed a lawsuit or made a der les: Accidents, employment disputes, insurance claims, or rights to sue	nand for payment	
		Describe each claim		at aff alaima
	■ No	ontingent and unliquidated claims of every nature, including counterclaims	s of the deptor and rights to s	et on claims
		Describe each claim		
	■ No	Give specific information		
	. Add th	ne dollar value of all of your entries from Part 4, including any entries for part 4. Write that number here	-	\$0.00
		ariba Anu Dusinasa Balatad Branantu Vau Oura ar Haus an Intersat In List anu vaal a	L	

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Debte	or 1 Christopher Davila		Case number (if known)	
37. <b>D</b> c	o you own or have any legal or equitable interest in any business-rela	ated property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part 6	6: Describe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	st In.	
46. <b>D</b>	Oo you own or have any legal or equitable interest in any farm	n- or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	7: Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
Ε	Do you have other property of any kind you did not already lis Examples: Season tickets, country club membership	st?		
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write t	that number here		\$0.00
Part 8	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$4,900.00		
57.	Part 3: Total personal and household items, line 15	\$5,900.00		
58.	Part 4: Total financial assets, line 36	\$0.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+\$0.00		
62.	Total personal property. Add lines 56 through 61	\$10,800.00	Copy personal property total	\$10,800.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$10,800.00

						_		
Fil	l in this info	rmation to identify your ca	se:					
De	ebtor 1	Christopher Davila						
_		First Name	Middle Name	L	ast Name			
	ebtor 2 ouse if, filing)	First Name	Middle Name	L	ast Name			
Un	nited States E	Bankruptcy Court for the:	EASTERN DISTRICT OF N	IEW Y	ORK			
	ase number known)					☐ Check if this is an amended filing		
Ot	fficial F	orm 106C						
		le C: The Pro	perty You Cla	aim	as Exempt	4/19		
the nee	property you	I listed on <i>Schedule A/B: Pro</i> and attach to this page as ma	perty (Official Form 106A/B	as yo	our source, list the property that yo	for supplying correct information. Using u claim as exempt. If more space is y additional pages, write your name and		
spe any fun exe	ecific dollar applicable ds—may be emption to a	amount as exempt. Alterna statutory limit. Some exen unlimited in dollar amoun	ntively, you may claim the nptions—such as those fo t. However, if you claim a	full fa r heal n exen	ir market value of the property b th aids, rights to receive certain nption of 100% of fair market va	One way of doing so is to state a eing exempted up to the amount of benefits, and tax-exempt retirement ue under a law that limits the nt, your exemption would be limited		
Pa	rt 1: Iden	tify the Property You Clain	n as Exempt					
1.	Which set	of exemptions are you clai	ming? Check one only, eve	en if yo	ur spouse is filing with you.			
	You are	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)						
	☐ You are	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	For any pr	operty you list on Schedul	e A/B that you claim as ex	empt,	fill in the information below.			
		ption of the property and line of that lists this property	on Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption		
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	-	ota Prius 105000 miles	\$4,900.00		\$4,900.00	NYCPLR § 5205(a)(8)		
	Line from S	Schedule A/B: <b>3.1</b>			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption of more than \$170,350?  (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)  No							
		oid you acquire the property No Yes	covered by the exemption w	vithin 1	,215 days before you filed this cas	e?		

Fill in this information to identify your case:						
Debtor 1	Christopher Davi					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F NEW YORK			
Case number						
(if known)					☐ Check if this is an	
					amended filing	

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Fill in this i	information to identify your o	case:			
Debtor 1	Christopher Davil	a			
	First Name	Middle Name	Last Name		
Debtor 2	F:	ACT III AT			
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case numb	or				
(if known)					☐ Check if this is an
					amended filing
	Form 106E/F				
<u>Schedu</u>	le E/F: Creditors W	ho Have Unseci	ured Claims		12/15
Schedule G: Schedule D: ( left. Attach th name and cas	Executory Contracts and Unexpi Creditors Who Have Claims Sect the Continuation Page to this pag se number (if known).	ired Leases (Official Form a ured by Property. If more s e. If you have no informatio	06G). Do not include pace is needed, copy t	any creditors with partially secu the Part you need, fill it out, num	erty (Official Form 106A/B) and on red claims that are listed in ber the entries in the boxes on the of any additional pages, write your
	List All of Your PRIORITY Un				
	creditors have priority unsecured	d claims against you?			
	Go to Part 2.				
☐ Yes.					
Part 2:	ist All of Your NONPRIORIT	V Unsecured Claims			
	creditors have nonpriority unsec				
	ou have nothing to report in this pa	art. Submit this form to the co	urt with your other sche	edules.	
Yes.					
unsecure	of your nonpriority unsecured cla ed claim, list the creditor separately creditor holds a particular claim, li	for each claim. For each cla	im listed, identify what t	ype of claim it is. Do not list claims	already included in Part 1. If more
					Total claim
4.1 <b>An</b>	nerican Honda Finance	Last 4 digits	s of account number	4382	\$0.00
	priority Creditor's Name				
	n: National Bankruptcy C		ha dahi inawasa da	Opened 04/13 Last Act	ve .
	Box 166469 ing, TX 75016	wnen was t	he debt incurred?	4/25/16	
	nber Street City State Zip Code	As of the da	te you file, the claim i	s: Check all that apply	
Who	o incurred the debt? Check one.				
	Debtor 1 only	☐ Continge	nt		
	Debtor 2 only	☐ Unliquida	ited		
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and and	ther Type of NO	NPRIORITY unsecured	d claim:	
	Check if this claim is for a comm	nunity	oans		
deb	t	☐ Obligation		ration agreement or divorce that ye	ou did not
	ne claim subject to offset?	report as pri	•		
<b>=</b> 1			•	g plans, and other similar debts	
	Yes	Other, S	pecify Lease		

Debtor 1 Christopher Davila						
4.2	Amex Nonpriority Creditor's Name	Last 4 digits of account number	1833	\$1,776.00		
	Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 05/12 Last Active 12/19/12			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	Check if this claim is for a community debt		aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharir	og plane, and other similar debte			
	■ No					
	☐ Yes	Other. Specify Credit Card	1			
4.3	Amex Nonpriority Creditor's Name	Last 4 digits of account number	0333	\$1,535.00		
	Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	Opened 12/09/12 Last Active 1/17/17			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community					
	debt Is the claim subject to offset?					
	No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Credit Card				
4.4	Capital One	Last 4 digits of account number	6799	\$2,022.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Solt Loke City LLT 84430	When was the debt incurred?	Opened 12/13 Last Active 1/28/20			
	Salt Lake City, UT 84130  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	•				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated ☐ Disputed				
	Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not				
	■ No	report as priority claims  Debts to pension or profit-sharir	og plans, and other similar debts			
		·				
	☐ Yes	Other. Specify Credit Card	<u> </u>			

Debtor 1 Christopher Davila						
4.5	Chase Card Services	Last 4 digits of account number	8590	\$5,734.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 02/11 Last Active 9/02/16			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt	<ul><li>☐ Student loans</li><li>☐ Obligations arising out of a sepa</li></ul>	aration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing				
	Yes	Other. Specify Credit Card	<u> </u>			
4.6	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	7571	\$4,475.00		
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 11/12 Last Active 11/16/16			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	-				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit Card	1			
4.7	Chase Card Services	Last 4 digits of account number	9809	\$2,421.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 02/14 Last Active 9/04/16			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated ☐ Disputed				
	☐ Debtor 1 and Debtor 2 only					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharir	ng plans, and other similar debts			
	☐ Yes	■ Other. Specify Credit Card				
	<b>—</b> 163	Otner. Specify	4			

Debto	r 1 Christopher Davila		Case number (if known)			
4.8	Chase Card Services	Last 4 digits of account number	2298	\$658.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim	Opened 5/19/16 Last Active 8/28/16			
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.9	Citibank	Last 4 digits of account number	4158	\$0.00		
	Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bk dept Po Box 790034	When was the debt incurred?	Opened 12/19 Last Active 02/20			
	St Louis, MO 63179  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing				
	Yes	Other. Specify Credit Line	Secured			
4.1 0	Citibankna	Last 4 digits of account number	6825	\$0.00		
	Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bk dept Po Box 790034	When was the debt incurred?	Opened 01/13 Last Active 2/09/18			
	St Louis, MO 63179  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	$\square$ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharir	o plans, and other similar debts			
	■ No	Other. Specify     Check Cred				
	<b>□</b> 1€9	Other, Specify	ant or Ellic of Orcalt			

Debto	Christopher Davila		Case number (if known)			
4.1	Credit One Bank	Last 4 digits of account number	6009	\$8.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 05/18 Last Active 1/16/20			
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	<u> </u>			
4.1	Credit One Bank	Last 4 digits of account number	5755	\$0.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 98873	When was the debt incurred?	Opened 05/19 Last Active 6/17/19			
	Las Vegas, NV 89193  Number Street City State Zip Code	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.	715 of the date you me, the claim.	o. Oncok ali that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharin				
	Yes	Other. Specify Credit Card	l			
4.1	Department of Education/Nelnet	Last 4 digits of account number	1712	Unknown		
	Nonpriority Creditor's Name Attn: Claims Po Box 82505	When was the debt incurred?	Opened 06/13 Last Active 09/13			
	Lincoln, NE 68501  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
		☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured				
	At least one of the debtors and another	■ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<u></u>	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	☐ Other. Specify	<del>-</del> · · · ·			
	<b>—</b> 103	Educationa	<u> </u>			
			<del></del>			

Debt	or 1 Christopher Davila		Case number (if known)		
4.1 4	Department of Education/Nelnet	Last 4 digits of account number	1812	Unknown	
	Nonpriority Creditor's Name Attn: Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 06/13 Last Active 09/13		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	<ul><li>Student loans</li><li>Obligations arising out of a sepa report as priority claims</li></ul>	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharin	g plans, and other similar debts		
	□ Yes	☐ Other. Specify	<b>3</b>		
	_ 165	Educationa			
	Dontontmont Ctone Notional				
4.1 5	Deptartment Store National Bank/Macy's	Last 4 digits of account number	2401	\$0.00	
	Nonpriority Creditor's Name Attn: Bankruptcy 9111 Duke Boulevard	When was the debt incurred?	Opened 11/27/09 Last Active 4/21/11		
	Mason, OH 45040  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Charge Acc	count		
4.1 6	Discover Financial  Nonpriority Creditor's Name	Last 4 digits of account number	4398	\$3,713.00	
	Attn: Bankruptcy Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 03/14 Last Active 9/02/16		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent ☐ Unliquidated			
	Debtor 2 only				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Credit Card	I		

Debtor	1 Christopher Davila		Case number (if known)	
4.1	ECMC Nonpriority Creditor's Name Attn: Bankruptcy 111 Washington Ave South, Ste	Last 4 digits of account number  When was the debt incurred?	3311  Opened 6/20/13 Last Active 7/30/13	\$0.00
	1400 Minneapolis, MN 55401 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured	A claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Student loans	ration agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharin	·	
	Yes	☐ Other. Specify		
		Educationa	ll	
4.1 8	ECMC Nonpriority Creditor's Name	Last 4 digits of account number	3211	\$0.00
	Attn: Bankruptcy 111 Washington Ave South, Ste 1400	When was the debt incurred?	Opened 6/20/13 Last Active 7/30/13	
	Minneapolis, MN 55401  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Student loans □ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin☐ Other. Specify	g plans, and other similar debts	
		Educationa	I	
4.1 9	ECMC	Last 4 digits of account number	3711	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 111 Washington Ave South, Ste 1400	When was the debt incurred?	Opened 9/20/12 Last Active 12/07/12	
	Minneapolis, MN 55401  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	l .	

Debtor	1 Christopher Davila		Case number (if known)	
4.2	ECMC Nonpriority Creditor's Name Attn: Bankruptcy 111 Washington Ave South, Ste	Last 4 digits of account number  When was the debt incurred?	3811 — — — — — — — — — — — — — — — — — —	\$0.00
	1400 Minneapolis, MN 55401 Number Street City State Zip Code	As of the date you file, the claim i		
	Who incurred the debt? Check one.  Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	ıl	
4.2 1	ECMC	Last 4 digits of account number	9211	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 111 Washington Ave South, Ste 1400	When was the debt incurred?	Opened 8/15/11 Last Active 12/07/12	
	Minneapolis, MN 55401 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed	d eleter.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  Student loans	a claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	☐ Other. Specify		
	_ 1.65	Educationa	<u> </u>	
4.2	ECMC	Last 4 digits of account number	8071	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy 111 Washington Ave South, Ste 1400	When was the debt incurred?	Opened 9/30/09 Last Active 4/19/11	
	Minneapolis, MN 55401  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	ı cıaım:	
	Check if this claim is for a community debt	<ul><li>Student loans</li><li>Obligations arising out of a sepa</li></ul>		
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	☐ Other. Specify		
		Educationa	ıl	

Debto	Christopher Davila		Case number (if known)	
4.2	Eos Cca	Last 4 digits of account number	8249	\$6,306.00
3	Nonpriority Creditor's Name Attn: Bankruptcy 700 Longwater Dr	When was the debt incurred?	Opened 11/17	ψο,σσο.σσ
	Norwell, MA 02061  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection	Attorney Sallie Mae Bank	
4.2	Fingerhut Nonpriority Creditor's Name	Last 4 digits of account number	3182	\$0.00
	Attn: Bankruptcy Po Box 1250 Saint Cloud, MN 56395	When was the debt incurred?	Opened 09/18 Last Active 10/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i		
	■ Debtor 1 only			
	Debtor 2 only			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
4.2 5	LendingClub Nonpriority Creditor's Name	Last 4 digits of account number	3912	Unknown
	Attn: Bankruptcy 595 Market St, Ste 200 San Francisco, CA 94105	When was the debt incurred?	Opened 05/15 Last Active 9/01/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plans, and other similar debts	
	■ No	·	y pians, and other similal debts	
	Yes	Other. Specify Unsecured		

Debtor	Christopher Davila		Case number (if known)				
4.2 6	Municipal Credit Union	Last 4 digits of account number	0935	\$0.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3205 New York, NY 10007	When was the debt incurred?	Opened 01/19 Last Active 2/05/20				
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.2	Municipal Credit Union	Last 4 digits of account number	0201	\$0.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3205	When was the debt incurred?					
	New York, NY 10007  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	,	or orion all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Secured					
4.2	Navient	Last 4 digits of account number	3591	\$0.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9640 Wiles-Barr, PA 18773	When was the debt incurred?	Opened 09/13 Last Active 9/21/16				
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify					
		Educationa	ıl				

Debto	Christopher Davila		Case number (if known)	
4.2 9	Portfolio Recovery	Last 4 digits of account number	6677	\$1,224.00
	Nonpriority Creditor's Name Attn: Bankruptcy 120 Corporate Blvd	When was the debt incurred?	Opened 06/18	
	Norfold, VA 23502  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Bank Usa N	Company Account Capital One I.A.	
4.3 0	Prosper Funding LLC	Last 4 digits of account number	1212	\$0.00
	Nonpriority Creditor's Name 221 Main Street Suite 300 San Francisco, CA 94105	When was the debt incurred?	Opened 03/15 Last Active 9/04/16	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	L. L. L.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Unsecured		
40				
4.3 1	Syncb/PPC Nonpriority Creditor's Name	Last 4 digits of account number	7366	\$266.00
	Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 12/19 Last Active 1/26/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card		

Debto	Christopher Davila		Case number (if known)		
4.3	Td Auto Finance	Last 4 digits of account number	9725	\$0.00	
2	Nonpriority Creditor's Name			<u> </u>	
	Attn: Bankruptcy Dept Po Box 9223	When was the debt incurred?	Opened 04/16 Last Active 2/08/17		
	Farmington Hills, MI 48333  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
		_			
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Automobile	•		
4.3	Toyota Financial Services	Last 4 digits of account number	0001	\$2,412.00	
	Nonpriority Creditor's Name	_			
	Attn: Bankruptcy Dept Po Box 8026	When was the debt incurred?	Opened 05/16 Last Active 1/21/20		
	Cedar Rapids, IA 52409	_			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing			
	Yes	Other. Specify Automobile	•		
4.3	USDOE/GLELSI	Last 4 digits of account number	8581	\$18,911.00	
<del>-</del>	Nonpriority Creditor's Name				
	Attn: Bankruptcy Po Box 7860	When was the debt incurred?	Opened 08/11 Last Active 8/17/16		
	Madison, WI 53707  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Oncok all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt	Check if this claim is for a community			
	Is the claim subject to offset?	report as priority claims	·		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
		Educationa	l		

Debtor	Christopher Davila		Case number (if known)					
4.3	Volkswagen Credit, Inc	Last 4 digits of account number	8214	\$15,974.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3 Hillboro, OR 97123 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim i						
	Who incurred the debt? Check one.	, to or the date you me, the claim.	or officer all that apply					
	Debtor 1 only	Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Auto Lease	)					
4.3	Volkswagen Credit, Inc	Last 4 digits of account number	1133	\$13,753.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3 Hillboro, OR 97123	When was the debt incurred?	Opened 5/12/16 Last Active 3/27/17					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin						
	Yes	Other Specify Auto Lease						
4.3	Wells Fargo/Bob's Discount							
7	Furniture Nonpriority Creditor's Name	Last 4 digits of account number	7000	\$0.00				
	Po Box 10438 Mac F8235-02f Des Moines, IA 50306	When was the debt incurred?	Opened 9/01/13 Last Active 4/17/15					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply					
	Who incurred the debt? Check one.							
	Debtor 1 only	Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed	L.L.					
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	a ciaim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ng out of a separation agreement or divorce that you did not					
	No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes							
	<b>□</b> 165	Other. Specify Charge Acc	- Curit					

### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1	Christopher Davila	Case number (if known)	

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				1	otal Claim
	6f.	Student loans	6f.	\$	18,911.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6~	\$	0.00
	Ch	you did not report as priority claims	6g.	· —	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	62,277.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	81,188.00

Fill in this inform				
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK	
Case number _				☐ Check if this is an amended filing

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<del>_</del>
	City		State	ZIP Code	<u> </u>
2.4	,				
	Name				<del>_</del>
	Number	Street			
	City		State	ZIP Code	_
2.5	-				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

Official Form 106G

Fill in this	information to identify your	case:			
Debtor 1	Christopher Davi	la			
<b>D</b> 1 ( )	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
Case num	her			_	
(if known)					Check if this is an amended filing
Officia	l Form 106H				Ç
	lule H: Your Cod	ebtors			12/15
ill it out, a /our name  1. Do  No	nd number the entries in the and case number (if known) you have any codebtors? (If	boxes on the left. Attach Answer every question you are filing a joint case,	n the Additional Page to .  do not list either spouse	e as a codebtor.	needed, copy the Additional Page, p of any Additional Pages, write
Arizor	hin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3.  B. Did your spouse, former sports	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		
in line Form	e 2 again as a codebtor only i 106D), Schedule E/F (Official olumn 2.	f that person is a guaran	tor or cosigner. Make	sure you have listed to 16G). Use Schedule D,	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	Name			☐ Schedule D, lin☐ Schedule E/F,☐ Schedule G, lin☐	line
	Number Street City	State	ZIP Code		
3.2	Name			☐ Schedule D, lin☐ Schedule E/F, ☐ Schedule G, lin☐	line
-	Number Street City	State	ZIP Code	_	

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							_				
Fill	in this information	to identify your ca	ase:								
Del	btor 1	Christopher	Davila			_					
	btor 2 buse, if filing)										
Uni	ited States Bankrup	otcy Court for the	: EASTERN DISTRICT	OF NEW YORK							
1	se number			_			Chec	k if this is	• •		
(If kr	nown)							n amende	_		
_										g postpetition ollowing date:	
0	fficial Form	<u> 1061</u>					Ī	/IM / DD/ \	YYYY		
S	chedule I:	Your Inc	ome								12/15
spo atta	use. If you are sep ch a separate she	parated and you	are married and not filing work filing won the top of any additi	ith you, do not inclu	ude infor	mati	on abou	t your spe	ouse. If mo	ore space is	needed,
1.	Fill in your emplinformation.	loyment		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more		Employment status	■ Employed				☐ Empl	oyed		
	attach a separate information abou employers.		Employment status	☐ Not employed				☐ Not e	mployed		
			Occupation	Correction office	cer						
	Include part-time self-employed wo		Employer's name	City of New Yo	rk						
	Occupation may or homemaker, if		Employer's address	450 West 33rd New York, NY 1		I					
			How long employed t	here?				_			
Par	rt 2: Give De	etails About Mor	nthly Income								
spou	use unless you are	separated.	ate you file this form. If		·	•				·	
	e space, attach a s										
							For De	Dtor 1		btor 2 or ng spouse	
2.			ry, and commissions (b calculate what the month		2.	\$	6	,066.67	\$	N/A	
3.	Estimate and lis	st monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lin	ne 2 + line 3.		4.	\$	6,0	66.67	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debto	or 1	Christopher Davila	-	Ca	ise number ( <i>if kr</i>	nown)				
				F	For Debtor 1			Debtor :		
	Cop	by line 4 here	4.	\$	6,066	6.67	\$		N/A	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	. \$	953	3.33	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	. \$		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	. \$	857	<b>7.18</b>	\$		N/A	=
	5d.	Required repayments of retirement fund loans	5d	. \$	53	3.52	\$		N/A	_
	5e.	Insurance	5e			9.55	\$		N/A	_
	5f.	Domestic support obligations	5f.			0.00	\$_		N/A	_
	5g.	Union dues	5g			1.25	\$		N/A	_
	5h.	Other deductions. Specify: Garnishments	_ 5h				+ \$		N/A	_
		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,622		\$_		N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,444	.20	\$		N/A	_
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	. \$	s (	0.00	\$		N/A	
	8b.	Interest and dividends	8b			0.00	\$-		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	. \$	; (	0.00	\$		N/A	_
	8d.	Unemployment compensation	8d	. \$	· · · · · ·	0.00	\$		N/A	_
	8e.	Social Security	8e	. \$	5	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.			0.00	\$		N/A	_
	8g.	Pension or retirement income	8g			0.00			N/A	_
	8h.	Other monthly income. Specify:	_ 8h	.+ ↓	·	0.00	+ »		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	(	0.00	\$		N/A	4
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	3,444.20	+ \$		N/A	= \$	3,444.20
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*	3,444.20	.   *		17/7	-	0,444.20
11.	1. State all other regular contributions to the expenses that you list in <i>Schedule J</i> .  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .							0.00		
		d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certainlies						. 12.	\$	3,444.20
13.	Do	you expect an increase or decrease within the year after you file this form No.	?						Combin monthl	ned ly income
	_	Yes. Explain:								

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify your case:						
Deb	otor 1 Christopher Davila		Che	eck if this is:			
	- Simotophor Davida			An amended filing			
	ouse, if filling)			A supplement show 13 expenses as of	ving postpetition chapter the following date:		
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YO	MM / DD / YYYY					
	e number nown)						
	fficial Form 106J						
	chedule J: Your Expenses				12/15		
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this fo mber (if known). Answer every question.	filing together, bo orm. On the top of	oth are equal any addit	ually responsible fo ional pages, write y	or supplying correct your name and case		
Par 1.	t 1: Describe Your Household Is this a joint case?						
	■ No. Go to line 2.  □ Yes. Does Debtor 2 live in a separate household?						
	□ No						
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses form	or Separate House	hold of De	btor 2.			
2.	Do you have dependents? ■ No						
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?		
	Do not state the dependents names.				□ No □ Yes		
					□ No		
					☐ Yes		
					□ No		
					☐ Yes		
					□ No □ Yes		
3.	Do your expenses include expenses of people other than yourself and your dependents?			_	Li res		
Par	t 2: Estimate Your Ongoing Monthly Expenses						
Est exp	imate your expenses as of your bankruptcy filing date unless your enses as of a date after the bankruptcy is filed. If this is a supple plicable date.	u are using this fo emental <i>Schedule</i>	orm as a s J, check t	upplement in a Cha the box at the top of	pter 13 case to report f the form and fill in the		
the	lude expenses paid for with non-cash government assistance if y value of such assistance and have included it on <i>Schedule I: Yo</i>			Your expe			
(Of	ficial Form 106I.)			Tour expe	enses		
4.	The rental or home ownership expenses for your residence. Incompayments and any rent for the ground or lot.	clude first mortgage	4.	\$	1,350.00		
	If not included in line 4:						
	4a. Real estate taxes		4a.	\$	0.00		
	4b. Property, homeowner's, or renter's insurance		4b.	·	0.00		
	4c. Home maintenance, repair, and upkeep expenses		4c.	·	0.00		
F	4d. Homeowner's association or condominium dues	a a accidente e	4d.	·	0.00		
5.	Additional mortgage payments for your residence, such as hom	e equity loans	5.	<b>D</b>	0.00		

Debtor 1 _(	Christopher Davila	Case num	ber (if known)	
6. <b>Utilitie</b>	s:			
	Electricity, heat, natural gas	6a.	\$	50.00
	Nater, sewer, garbage collection	6b.	\$	0.00
	Felephone, cell phone, Internet, satellite, and cable services	6c.	\$	230.00
	Other. Specify:	6d.	· ·	0.00
	and housekeeping supplies	od. 7.	· -	800.00
	are and children's education costs	8.	\$	
-		9.	\$	0.00
	ng, laundry, and dry cleaning		· -	150.00
	nal care products and services	10.	\$	100.00
	al and dental expenses	11.	\$	0.00
	portation. Include gas, maintenance, bus or train fare.	12.	\$	50.00
	include car payments. ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
			· -	
	able contributions and religious donations	14.	\$	0.00
5. Insura				
	include insurance deducted from your pay or included in lines 4 or 20.	150	<b>c</b>	0.00
	Life insurance	15a.	· -	0.00
	Health insurance	15b.	· · -	0.00
	Vehicle insurance	15c.	·	230.00
	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or		_	
Specify		16.	\$	0.00
	ment or lease payments:		•	
	Car payments for Vehicle 1	17a.	·	300.00
	Car payments for Vehicle 2	17b.	· -	0.00
	Other. Specify:	17c.	·	0.00
17d. (	Other. Specify:	17d.	\$	0.00
	ayments of alimony, maintenance, and support that you did not re		•	0.00
	ted from your pay on line 5, Schedule I, Your Income (Official Forn	n <b>106I).</b> 18.	· ·	0.00
9. <b>Other</b>	payments you make to support others who do not live with you.		\$	0.00
Specify		19.		
	real property expenses not included in lines 4 or 5 of this form or			
	Mortgages on other property	20a.	· -	0.00
20b. F	Real estate taxes	20b.		0.00
20c. F	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. N	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. H	Homeowner's association or condominium dues	20e.	\$	0.00
1. Other:	Specify: Union Fees	21.	+\$	90.00
	onon roos			00.00
	ate your monthly expenses			
22a. Ad	dd lines 4 through 21.		\$	3,350.00
22b. Co	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form	106J-2	\$	
22c. Ac	dd line 22a and 22b. The result is your monthly expenses.		\$	3,350.00
				3,330.00
	ate your monthly net income.			
23a. (	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,444.20
23b. (	Copy your monthly expenses from line 22c above.	23b.	-\$	3,350.00
23c. S	Subtract your monthly expenses from your monthly income.			24.22
	The result is your monthly net income.	23c.	\$	94.20
	•			
	u expect an increase or decrease in your expenses within the year			
	mple, do you expect to finish paying for your car loan within the year or do you ex	spect your mortgage	payment to increase	or decrease because of a
	ation to the terms of your mortgage?			
■ No.				
☐ Yes	Explain here:			

Official Form 106Dec  Declaration About an Individual Debtor's Schedules  If two married people are filing together, both are equally responsible for supplying correct information.  You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below  Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  No  Yes. Name of person  Attach Bankruptcy Petition Preparer's Ni Declaration, and Signature (Official Form Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  X Isl Christopher Davila Signature of Debtor 1	Fill in this infor	rmation to identify your	case:			
Debtor 2   Spouse if, filling    First Name   Middle Name   Last Name   Last Name	Debtor 1		a			
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK  Case number (Il known) Check if this is an amended filling  Official Form 106Dec  Declaration About an Individual Debtor's Schedules  If two married people are filling together, both are equally responsible for supplying correct information.  You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below  Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  No  Yes. Name of person  Attach Bankruptcy Petition Preparer's Ni Declaration, and Signature (Official Form Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  X /s/ Christopher Davila Signature of Debtor 1		First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:  EASTERN DISTRICT OF NEW YORK  Case number (If known)  Check if this is an amended filing amended filing amended filing amended filing amended filing amended filing because two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up the pears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below  Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  No  Yes. Name of person  Attach Bankruptcy Petition Preparer's Noneclaration, and Signature (Official Form Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  X /s/ Christopher Davila Signature of Debtor 1		First Name	Middle Nome	Loot Nome		
Case number (If known)    Check if this is ar amended filing	(Spouse if, filing)	First Name	Middle Name	Last Name		
Official Form 106Dec Declaration About an Individual Debtor's Schedules  If two married people are filing together, both are equally responsible for supplying correct information.  You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up tyears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below  Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  No Yes. Name of person  Attach Bankruptcy Petition Preparer's Noneclaration, and Signature (Official Form Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  X /s/ Christopher Davila Signature of Debtor 1	United States B	ankruptcy Court for the:	EASTERN DISTRICT OF	F NEW YORK		
Official Form 106Dec  Declaration About an Individual Debtor's Schedules  If two married people are filing together, both are equally responsible for supplying correct information.  You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for uprivers, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below  Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  No  Yes. Name of person  Attach Bankruptcy Petition Preparer's N. Declaration, and Signature (Official Form Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  X Isl Christopher Davila Signature of Debtor 1	Case number					
Declaration About an Individual Debtor's Schedules  If two married people are filing together, both are equally responsible for supplying correct information.  You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below  Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  No  Yes. Name of person  Attach Bankruptcy Petition Preparer's Noneclaration, and Signature (Official Form Declaration, and Signature (Official Form Declaration).  Vision Preparer's Noneclaration and that they are true and correct.  X /s/ Christopher Davila Signature of Debtor 1	(if known)					☐ Check if this is an
Declaration About an Individual Debtor's Schedules  If two married people are filing together, both are equally responsible for supplying correct information.  You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  Sign Below  Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  No  Yes. Name of person  Attach Bankruptcy Petition Preparer's Noneclaration, and Signature (Official Form Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  X /s/ Christopher Davila Signature of Debtor 1						amended filing
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?  No  Yes. Name of person  Attach Bankruptcy Petition Preparer's Not Declaration, and Signature (Official Form Declaration, and Signature (Official Form Declaration)  Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  X /s/ Christopher Davila Christopher Davila Signature of Debtor 1	You must file thoobtaining mone	is form whenever you fi ey or property by fraud in	le bankruptcy schedules n connection with a bank	or amended schedules. N	laking a false staten	
■ No  Yes. Name of person  Attach Bankruptcy Petition Preparer's Non-Declaration, and Signature (Official Form  Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  X /s/ Christopher Davila Christopher Davila Signature of Debtor 1  Attach Bankruptcy Petition Preparer's Non-Declaration, and Signature (Official Form)  Attach Bankruptcy Petition Preparer's Non-Declaration, and Signature (Official Form)		•	one who is NOT an atter	nov to halp you fill out har	akruntov forme?	
Yes. Name of person  Attach Bankruptcy Petition Preparer's Not Declaration, and Signature (Official Form  Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  X /s/ Christopher Davila Christopher Davila Signature of Debtor 1  Attach Bankruptcy Petition Preparer's Not Declaration, and Signature (Official Form  Attach Bankruptcy Petition Preparer's Not Declaration, and Signature (Official Form  Attach Bankruptcy Petition Preparer's Not Declaration, and Signature (Official Form  Signature of Debtor 2	Dia you pa	ay or agree to pay some	one who is NOT an attori	ley to help you fill out bar	ikruptcy forms?	
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.  X /s/ Christopher Davila Christopher Davila Signature of Debtor 1  Declaration, and Signature (Official Form	■ No					
that they are true and correct.  X /s/ Christopher Davila Christopher Davila Signature of Debtor 1  X Signature of Debtor 2	☐ Yes.	Name of person				
Christopher Davila Signature of Debtor 2 Signature of Debtor 1			that I have read the sumr	mary and schedules filed \	with this declaration	and
Signature of Debtor 1	X /s/ Ch	ristopher Davila		X		
Date August 5 2020				Signature of De	ebtor 2	
August 0, 2020	Date	August 5, 2020		Date		

Official Form 106Dec

	in this infor	mation to identify your	case:			
De	btor 1	Christopher Davi				
_	h ( 0	First Name	Middle Name	Last Name		
1 -	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT (	OF NEW YORK		
	se number nown)					Check if this is an amended filing
	ficial Fo	rm 107				g
	ficial Fo atement		Affairs for Indiv	iduals Filing for E	Bankruptcy	4/19
info nun	rmation. If n	nore space is needed, a n). Answer every ques	attach a separate sheet t	e are filing together, both are o this form. On the top of ar ou Lived Before		
1.	What is you	r current marital status	s?			
	☐ Married	1				
	■ Not ma					
2.	During the I	ast 3 years, have you l	ived anywhere other tha	n where you live now?		
	■ No					
	_	st all of the places you liv	ved in the last 3 years. Do	not include where you live no	W.	
	Debtor 1 P	rior Address:	Dates Debtor lived there	1 Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
<b>3.</b> stat				egal equivalent in a commu Nevada, New Mexico, Puerto F		
	■ No □ Yes. Ma	ake sure you fill out <i>Sch</i> e	edule H: Your Codebtors (	Official Form 106H).		
Pa	rt 2 Expla	in the Sources of Your	Income			
4.	Fill in the tot	al amount of income you	received from all jobs and	ting a business during this y d all businesses, including par vive together, list it only once u	t-time activities.	endar years?
	■ No					
	☐ Yes. Fi	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income		

Official Form 107

De	btor 1	Ch	ristopher	Davila				Ca	ase number (if known	)	
_	<b>5</b>										
5.	Include and o	de inc other p	ome regard oublic bene	dless of wheth fit payments;	ner that inco pensions;	ome is taxable. Ex rental income; inte	amples rest; di		alimony; child sup ected from lawsuits	; royalties; and	ecurity, unemployment, d gambling and lottery
	List e	ach s	ource and	the gross inco	ome from e	ach source separa	tely. D	o not include income	that you listed in li	ne 4.	
	<b>=</b> 1	No									
		Yes. I	Fill in the de	etails.							
					Debtor 1				Debtor 2		
					Sources Describe	of income below.	eac (bet	ess income from th source fore deductions and lusions)	Sources of in Describe below		Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pa	yments You	Made Bef	ore You Filed for	Bankr	uptcy			
				-							
6.	Are either Debtor 1's or Debtor 2's debts primarily consumer debts?  No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."										
			•	90 days befo	ore you filed	d for bankruptcy, d	id you ¡	pay any creditor a to	tal of \$6,825* or m	ore?	
			□ No.	Go to line 7							
			☐ Yes	paid that cr not include	editor. Do i payments	not include payment to an attorney for t	nts for o	kruptcy case.	ligations, such as o	hild support a	nd alimony. Also, do
	_							that for cases filed o	on or after the date	or adjustment	
	•	Yes.				re primarily consuited for bankruptcy, d		ebts. pay any creditor a to	tal of \$600 or more	?	
			No.	Go to line 7							
			□ Yes	include pay	ments for d			al of \$600 or more a ons, such as child su			t creditor. Do not nclude payments to an
	Cred	ditor's	s Name an	d Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for
7.	<i>Inside</i> of wh	ers ind nich yo siness	clude your i ou are an of	elatives; any ficer, director	general pa r, person in	rtners; relatives of control, or owner	any ge of 20%		nerships of which y ng securities; and a	ou are a gene any managing	ral partner; corporations agent, including one fo
	_	No Voc. I	iot all noum	nanta ta an in	oidor						
			List all payr Name and	nents to an ir Address	isider.	Dates of payme	ent	Total amount	Amount you	Reason fo	or this payment
		uo. 0	riamo ana	7144.000		Dates of payme		paid	still owe	1100001110	ino paymont
8.	insid	er?			•			yments or transfer	any property on a	account of a	debt that benefited an
	includ	ue pa	yments on (	uebts guaran	teea or cos	igned by an inside	r.				
	_	No Voc. I	ict all save	nonte to on :-	sidor						
			Name and	nents to an ir Address	isidei	Dates of payme	ent	Total amount paid	Amount you still owe		or this payment editor's name
								p			

Del	otor 1	Christopher Davila			Case number	(if known)					
Pai	t 4:	Identify Legal Actions, Repossessi	ions, a	and Foreclosures							
9.	List a	nin 1 year before you filed for bankru all such matters, including personal inju fications, and contract disputes.									
		No Yes. Fill in the details.									
		se title se number	N	lature of the case	Court or agency		Status of th	e case			
10.		Vithin 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Theck all that apply and fill in the details below.									
		No. Go to line 11. Yes. Fill in the information below.									
	Cre	ditor Name and Address		escribe the Property		Date		Value of the property			
<ul> <li>Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from accounts or refuse to make a payment because you owed a debt?</li> <li>No</li> </ul>						mounts from your					
	☐ Yes. Fill in the details.  Creditor Name and Address			accribe the estion the		Doto	aatian waa	Amarint			
	Cre	altor Name and Address	D	escribe the action the	creditor took	taken	action was	Amount			
12.		in 1 year before you filed for bankru t-appointed receiver, a custodian, or No			rty in the possession of an	assigne	e for the bene	fit of creditors, a			
		Yes									
Pai	t 5:	List Certain Gifts and Contribution	s								
13.	With	in 2 years before you filed for bankro	uptcy	, did you give any gifts	s with a total value of more t	:han \$60	0 per person'	?			
		Yes. Fill in the details for each gift.  s with a total value of more than \$60	0	Describe the gifts		Dates the gi	s you gave	Value			
	Per	person son to Whom You Gave the Gift and dress:				tile gi	iits				
14.		in 2 years before you filed for bankro	uptcy	, did you give any gifts	or contributions with a total	al value	of more than	\$600 to any charity?			
		Yes. Fill in the details for each gift or co	ontrib	ution.							
	moi Cha	s or contributions to charities that the tree than \$600 arity's Name dress (Number, Street, City, State and ZIP Code		Describe what you	contributed	Dates	s you ibuted	Value			
Pai	t 6:	List Certain Losses									
15.		iin 1 year before you filed for bankru ambling?	ptcy c	or since you filed for b	ankruptcy, did you lose any	thing be	cause of thef	t, fire, other disaster			
		No Yes. Fill in the details.									
		scribe the property you lost and with the loss occurred	Inclu		verage for the loss rance has paid. List pending	Date loss	of your	Value of property lost			

Debtor 1 Christopher Davila

Case number (if known)

Pal	t /: LIS	st Certain Payments or Transfers								
6.	consulte	year before you filed for bankruptoed about seeking bankruptoy or preany attorneys, bankruptoy petition prep	pari	ng a bankruptcy pet	ition?		•		rty to a	anyone you
	■ No									
	_	s. Fill in the details.								
	Address Email o	Who Was Paid s r website address Who Made the Payment, if Not You	ı	Description and v transferred	alue of any pr	oper	ty	Date payment or transfer was made		Amount of payment
17.	promise	year before you filed for bankrupto d to help you deal with your credito clude any payment or transfer that yo	ors o	r to make payments				ay or transfer any prope	erty to a	anyone who
	■ No									
	_	s. Fill in the details.								
		Who Was Paid		Description and v transferred	alue of any pro	oper	ty	Date payment or transfer was made		Amount of payment
18.	3. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.									
	■ No □ Yes	. Fill in the details.								
				Description and o			D	h	Data	
	Addres	Who Received Transfer s		Description and v			payme	be any property or ints received or debts i exchange	mad	transfer was e
	Person'	's relationship to you						_		
19.		0 years before you filed for bankrul ary? (These are often called asset-pro			y property to a	a self	-settled	d trust or similar device	of whic	ch you are a
	☐ Yes	. Fill in the details.								
	Name o	f trust		Description and v	alue of the pro	opert	y transi	ferred	Date mad	Transfer was
Pai	t 8: Lis	st of Certain Financial Accounts, In	strui	ments, Safe Deposit	Boxes, and S	toraç	ge Units	<b>S</b>		
20.	sold, mo	year before you filed for bankrupto oved, or transferred? checking, savings, money market, o pension funds, cooperatives, asso	or ot	her financial accou	nts; certificate	s of c				
	■ No	. , , ,		•						
	☐ Yes	. Fill in the details.								
		Address (Number, Street, City, State and ZIP acc		st 4 digits of count number			or	Date account was closed, sold, moved, or transferred	bef	Last balance fore closing or transfer
21.		now have, or did you have within 1 other valuables?	year	before you filed for	bankruptcy, a	ıny s	afe dep	osit box or other depos	itory fo	or securities,
	■ No									
	_	s. Fill in the details.								
	Name o	f Financial Institution S (Number, Street, City, State and ZIP Code)		Who else had acc Address (Number, S		Des	scribe t	he contents		o you still ave it?
				State and ZIP Code)						

Deb	otor 1	Christopher Davila		Case n	number (if known)				
22.	_	you stored property in a storage unit or pla	ace other than your home within 1	year be	efore you filed for bankruptcy	?			
		Yes. Fill in the details.							
		ne of Storage Facility ress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Descri	be the contents	Do you still have it?			
Par	t 9:	Identify Property You Hold or Control for S	Someone Else						
23.		ou hold or control any property that someonomeone.	ne else owns? Include any proper	ty you k	porrowed from, are storing for	, or hold in trust			
	_	No Yes. Fill in the details.							
	_	ner's Name ress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Descri	be the property	Value			
Par	t 10:	Give Details About Environmental Informa	tion						
For	the pu	urpose of Part 10, the following definitions a	apply:						
	toxic	ronmental law means any federal, state, or l substances, wastes, or material into the aid lations controlling the cleanup of these sub	r, land, soil, surface water, ground						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
		ordous material means anything an environ nrdous material, pollutant, contaminant, or s		waste,	hazardous substance, toxic s	substance,			
Rep	ort all	notices, releases, and proceedings that yo	u know about, regardless of wher	they o	ccurred.				
24.	Has	any governmental unit notified you that you	may be liable or potentially liable	under	or in violation of an environme	ental law?			
		No							
		Yes. Fill in the details.							
		ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		vironmental law, if you ow it	Date of notice			
25.	Have	you notified any governmental unit of any	release of hazardous material?						
	_	No Yes. Fill in the details.							
	Nam	ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	_	vironmental law, if you ow it	Date of notice			
26.	Have	you been a party in any judicial or adminis	ziP Code) trative proceeding under any envi	ronmen	tal law? Include settlements a	and orders.			
	_	No Yes. Fill in the details.							
	_	e Title	Court or agoney	Natura	of the case	Status of the			
		e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature	of the case	case			
Par	t 11:	Give Details About Your Business or Conr	•						
27.	With	in 4 years before you filed for bankruptcy, d	lid you own a business or have an	y of the	following connections to any	/ business?			
		☐ A sole proprietor or self-employed in a tr	•	•	-				
		☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)					
Offici	al Forr	n 107 Statement o	f Financial Affairs for Individuals Filing	for Ban	kruptcy	page			

Deb	tor 1	Christopher Davila		Cas	e number (if known)
		☐ A partner in a partnership			
		☐ An officer, director, or managing ex	ecutive of a corporation		
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation		
		No. None of the above applies. Go to F	Part 12.		
		Yes. Check all that apply above and fill	in the details below for each business.		
		iness Name ress	Describe the nature of the business		Employer Identification number Do not include Social Security number or ITIN.
		ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed
		in 2 years before you filed for bankrupt autions, creditors, or other parties.	cy, did you give a financial statement to	o an	yone about your business? Include all financial
		No Yes. Fill in the details below.			
		ne ress ber, Street, City, State and ZIP Code)	Date Issued		
Part	12:	Sign Below			
are to with	rue a a bar .S.C.	nd correct. I understand that making a nkruptcy case can result in fines up to \$ §§ 152, 1341, 1519, and 3571.	false statement, concealing property, o	or ob	eclare under penalty of perjury that the answers taining money or property by fraud in connection s, or both.
		stopher Davila oher Davila	Signature of Debtor 2		
		e of Debtor 1			
Date	<b>A</b>	ugust 5, 2020	Date		
Did y ■ No	0	ttach additional pages to Your Stateme	nt of Financial Affairs for Individuals F	Filing	for Bankruptcy (Official Form 107)?
■ N	0	ay or agree to pay someone who is not			
⊔ Y6	es. Na	ame of Person Attach the <i>Bankruj</i>	olcy म्हाराजा मार्ट्यावारा Notice, Declaratio	ъп, ar	ia Signature (Official Form 119).

Fill in this infor	mation to identify your ca	ase:		1
Debtor 1	Christopher Davila			1
Debior 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTR	ICT OF NEW YORK	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Ea	was 100			
Official Fo				
Statemer	nt of Intentior	n for Indiv	riduals Filing Under Chapt	er 7 12/15
If you are an ind	ividual filing under chapt	er 7, you must fil	l out this form if:	
creditors hav	e claims secured by you	r property, or		
you have leas	sed personal property an	d the lease has n	ot expired.	
You must file thi	is form with the court wit	hin 30 days after	you file your bankruptcy petition or by the date s	
whiche on the		court extends the	e time for cause. You must also send copies to t	he creditors and lessors you list
on the	IOIIII			
		n a joint case, bo	th are equally responsible for supplying correct	information. Both debtors must
sign ar	nd date the form.			
Be as complete	and accurate as possible	. If more space is	s needed, attach a separate sheet to this form. Or	n the top of any additional pages,
	our name and case numl		•	
Don't do Lint V	a One ditana Wha Harra	Caarrad Claima		
Part 1: List Y	our Creditors Who Have	Secured Claims		
		t 1 of Schedule D	: Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
information be	elow. editor and the property tha	at is collateral	What do you intend to do with the property that	at Did you claim the property
identity the cr	editor and the property the	it is collateral	secures a debt?	as exempt on Schedule C?
Creditor's			Currender the property	□ No
name:			☐ Surrender the property.	□ No
name.			Retain the property and redeem it.	☐ Yes
Description of			☐ Retain the property and enter into a Reaffirmation Agreement.	<b>=</b> 100
property			☐ Retain the property and [explain]:	
securing debt:	:			
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	_
Description of			☐ Retain the property and enter into a	☐ Yes
Description of			Reaffirmation Agreement.	
property securing debt:			☐ Retain the property and [explain]:	
securing debt.	•			<del></del>
Creditor's			☐ Surrender the property.	□ No
name:			☐ Surrender the property. ☐ Retain the property and redeem it.	LI INU
namo.			Retain the property and redeem it.  Retain the property and enter into a	☐ Yes
Description of			Reaffirmation Agreement.	<del></del>
property			☐ Retain the property and [explain]:	
securing debt:	:		to the Armore designed.	

Official Form 108

Creditor's

Statement of Intention for Individuals Filing Under Chapter 7

☐ Surrender the property.

☐ No

Debtor 1	Christopher Davila	Case number (if known)	
nama:			Пу
name:		Retain the property and redeem it.	☐ Yes
Descrip	otion of	☐ Retain the property and enter into a Reaffirmation Agreement.	
propert		☐ Retain the property and [explain]:	
	ng debt:		_
	List Your Unexpired Personal Property Lea		
in the info	ormation below. Do not list real estate lease	isted in Schedule G: Executory Contracts and Unexpired s. Unexpired leases are leases that are still in effect; the se if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's r	name:		□ No
	on of leased		
Property:			☐ Yes
Lessor's r			□ No
	on of leased		
Property:			☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Lessor's r	name:		□ No
	on of leased		
Property:			☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
Lessor's r Description	name: on of leased		□ No
Property:			☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have indicate that is subject to an unexpired lease.	ed my intention about any property of my estate that sec	ures a debt and any personal
χ /s/ (	Christopher Davila	X	
Chr	istopher Davila	Signature of Debtor 2	
	ature of Debtor 1		
Date	e August 5, 2020	Date	

Official Form 108

Fill in this infor	mation to identify your case:				as directed in this form a	nd in Form
Debtor 1	Christopher Davila		122	2A-1Supp:		
Debtor 2 (Spouse, if filing)				■ 1. There is no	presumption of abuse	
	Bankruptcy Court for the: Eastern District of	New York	_     '		ion to determine if a pres be made under <i>Chapter</i>	
Case number				Calculation	(Official Form 122A-2).	
(if known)					Test does not apply now litary service but it could	
~ <i></i>				☐ Check if this	is an amended filing	
	orm 122A - 1					
Chapter	7 Statement of Your Cur	rrent Mor	nthly Inc	ome		04/20
attach a separate case number (if qualifying milita	and accurate as possible. If two married people a e sheet to this form. Include the line number to w known). If you believe that you are exempted fro ry service, complete and file Statement of Exemp alculate Your Current Monthly Income	which the addition m a presumption	nal information a of abuse becau	applies. On the top se you do not have	of any additional pages, we primarily consumer debts	rite your name and or because of
1. What is y	our marital and filing status? Check one or	nly.				
■ Not m	arried. Fill out Column A, lines 2-11.	•				
	ed and your spouse is filing with you. Fill or	ut both Columns	A and B, lines	2-11.		
☐ Marrie	ed and your spouse is NOT filing with you.	You and your s	spouse are:			
☐ Livi	ing in the same household and are not lega	ally separated. F	Fill out both Co	lumns A and B, lir	nes 2-11.	
per	ing separately or are legally separated. Fill halty of perjury that you and your spouse are ling apart for reasons that do not include evading	legally separated	d under nonban	kruptcy law that a	applies or that you and yo	
101(10A). For the 6 months,	erage monthly income that you received from all r example, if you are filing on September 15, the 6-m add the income for all 6 months and divide the total the same rental property, put the income from that p	nonth period would I by 6. Fill in the res	be March 1 throusult. Do not include	ugh August 31. If the de any income amou	e amount of your monthly incount more than once. For exar	ome varied during nple, if both
·				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
•	ss wages, salary, tips, bonuses, overtime, eductions).	and commission	ons (before all	\$ 2,800.0	00 \$	
,	and maintenance payments. Do not include 3 is filled in.	payments from	a spouse if	\$ 0.0	00 \$	_
of you or from an u and room	ints from any source which are regularly par your dependents, including child support inmarried partner, members of your household imates. Include regular contributions from a sp to not include payments you listed on line 3.	. Include regular d, your depender	contributions nts, parents,	\$0.0	<b>00</b> \$	_
<ol><li>Net incor</li></ol>	me from operating a business, profession,					
_			tor 1			
	ceipts (before all deductions)	\$ 0.00 -\$ 0.00				
•	and necessary operating expenses hly income from a business, profession, or far	· — —	Copy here ->	\$ 0.0	00 \$	
	me from rental and other real property	III \$	оору пого и		<u> </u>	_
J. HGUIIICUI	no nominanta and other real property	Deb	tor 1			
Gross red	ceipts (before all deductions)	\$ 0.00				
	and necessary operating expenses	-\$ 0.00				
•	hly income from rental or other real property	\$ 0.00	Copy here ->	\$		_
7. Interest,	dividends, and royalties			\$ 0.0	90 \$	

Official Form 122A-1

Case number (if known)

8. Unemployment compensation  Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For your spouse  9. Pension or retirement lincome. Do not include any amount received that was a social Security Act. Instead, list it here:  For your spouse  9. Pension or retirement lincome. Do not include any amount received that was a social Security Act. More pressure of the control include any compensation, pension, pay, amounty, or allowance point by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled in retired under any provision of title 10 other than chapter 61 of that title.  Income from all other sources not itseld above. Spacefy the source and in mode under the Federal law relating to the national emergency declared by the President under the Relational Emergencies Act (Go U. Sc. 10d of a sea) with respect to the cornavirus disease 2019 (COVID-18); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism, or compensation pension, pay, annuty, or allowance paid by the United States Government in connection with a disability, combate related injury of destability, or secretary and the sources on a separate page and put the total below.  11. Calculate your current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  12. Copy your total current monthly income for the year. Follow these steps:  12. Copy your total current monthly income for the year. Follow these steps:  13. Calculate the median family income for this part of the form.  14. In the median family income for your state and size of household.  15. In the median family income f	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:  For you \$ 0.00  For your spouse \$ 0.00  Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below  **Total amounts from separate pages, if any.**  1. Calculate your total current monthly income. Add lines 2 through 10 for					
the Social Security Act. Instead, list it here: For you spouse  9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Covernment in connection with a disability, combat-ristelled injury or little of the Covernment or connection with a disability combat-ristelled injury or disability.  In Income from all other sources not listed above. Specify the source and amount.  Do not include any benefits received under the Social Security Act, payments made under the Facetral law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus dessesse 2018 (COVID-19); payments received as a vicility of a disability, or disability,	For you \$ 0.00  For your spouse \$ Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  1. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below  **Total amounts from separate pages, if any.**  1. Calculate your total current monthly income. Add lines 2 through 10 for	3	0.00	\$		
Semilar or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.    O.00	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  1. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.  1. Calculate your total current monthly income. Add lines 2 through 10 for	3	0.00	\$		
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of little 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled it retired under any provision of title 10 other than chapter 61 of that title.  10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federial law relating to the national emergency declared by the President under the Federial law relating to the national emergency declared by the President under the Federial law relating to the national emergency declared by the President under the Federial law relating to the national emergency declared by the President under the Federial law relating to the national emergency declared by the President under the Federial law relating to the national emergency declared by the President under the Federial law relating to the national emergency declared by the President under the Federial law relating to the social security and the security of the social security of the security of	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  1. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below  Total amounts from separate pages, if any.	5	0.00	\$		
benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that to does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  Do not include any benefits received under the Social Security Act; payments made the source and amount. Do not include any benefits received under the Social Security Act; payments made under the National Emergences will title and the social of CoVID-19; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.  Total amounts from separate pages, if any.  11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  2.8,00.00 \$  Total amounts from separate pages, if any.  12. Calculate your current monthly income for the year. Follow these steps:  12.a. Copy your total current monthly income for the year. Follow these steps:  12.b. The result is your annual income for this part of the form  13. Calculate the median family income that applies to you. Follow these steps:  Fill in the mumber of people in your household.  14. Ill in the median family income from a ward of the form to the form. This list may also be available at the bankruptcy clerk's office.  14. Image of the page of the page 1, check box 2, The presumpt	benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.  O. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below  Total amounts from separate pages, if any.	3	0.00	\$		
Do not include any benefits received under the Social Socurity Act; payments made under the Rederal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the cornoavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.  11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  12. Calculate your current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from line 11  Copy line 11 here=>  \$ 2,800.00  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  13. Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  NY  Fill in the median family income for your state and size of household.  15. Fill in the median family income for your state and size of household.  16. In the state in which you live.  17. In a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  18. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3 and fill out Form 122A-2.  19. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  Sign Below  S 2,800.00	Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below  **Total amounts from separate pages, if any.**  1. Calculate your total current monthly income. Add lines 2 through 10 for					
Total amounts from separate pages, if any.  11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  12. Determine Whether the Means Test Applies to You  12. Calculate your current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from line 11  12b. The result is your annual income for this part of the form  12c. The result is your annual income that applies to you. Follow these steps:  Fill in the state in which you live.  NY  Fill in the median family income that applies to you. Follow these steps:  Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  14. How do the lines compare?  14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14a. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  14a. Sign Below	Total amounts from separate pages, if any. + \$  1. Calculate your total current monthly income. Add lines 2 through 10 for					
Total amounts from separate pages, if any.  11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.  2,800.00  12. Calculate your current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from line 11  Copy line 11 here>  2,800.00  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  13. Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  NY  Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  14. How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3. Do NOT fill out or file Official Form 122A-2.  Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  Sign Below  Sign Below	1. Calculate your total current monthly income. Add lines 2 through 10 for	S	0.00	\$		
11. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column B.    Sample   Samp	1. Calculate your total current monthly income. Add lines 2 through 10 for	S	0.00	\$		
art 2: Determine Whether the Means Test Applies to You  12. Calculate your current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from line 11		S	0.00	\$		
12a. Copy your total current monthly income from line 11  Copy line 11 here=>  \$ 2,800.00  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  12b. \$ 33,600.00  13. Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  NY  Fill in the number of people in your household.  1  Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  14. How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14b.  Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  Sign Below	each column. Then add the lotal for Column A to the total for Column B.	800.00	+ \$		Total	current monthly
Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  12b. The result is your annual income for this part of the form  12c. \$ 33,600.00  13. Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  NY  Fill in the median family income for your state and size of household.  1 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  14. How do the lines compare?  14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  Sign Below	2. Calculate your current monthly income for the year. Follow these steps:					
12b. The result is your annual income for this part of the form  12b. \$ 33,600.00  13. Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  NY  Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  14. How do the lines compare?  14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  Sign Below  Sign Below	12a. Copy your total current monthly income from line 11	Сору	line 11 h	nere=>	\$	2,800.00
13. Calculate the median family income that applies to you. Follow these steps:  Fill in the state in which you live.  NY  Fill in the number of people in your household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  14. How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14b.  Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  Go to Part 3 and fill out Form 122A-2.  Sign Below	Multiply by 12 (the number of months in a year)				X	12
Fill in the state in which you live.  NY  Fill in the number of people in your household.  1  Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  14. How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14b.  Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  Go to Part 3 and fill out Form 122A-2.  Sign Below	12b. The result is your annual income for this part of the form			12	b. \$	33,600.00
Fill in the number of people in your household.  Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  14. How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14b.  Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  Go to Part 3 and fill out Form 122A-2.  Sign Below	3. Calculate the median family income that applies to you. Follow these steps:					
Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.  14. How do the lines compare?  14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse.  Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2.  Go to Part 3 and fill out Form 122A-2.  Sign Below	Fill in the state in which you live.					
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Line 12b is less than or equal to line 13. On the top of page 1, check box 1, <i>There is no presumption of abuse</i> .  Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2</i> .  Go to Part 3 and fill out Form 122A-2.  Sign Below	To find a list of applicable median income amounts, go online using the link specified in	the separa	te instruct		\$	57,137.00
Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2</i> .  Go to Part 3 and fill out Form 122A-2.  Sign Below	4. How do the lines compare?					
Go to Part 3 and fill out Form 122A–2.  Part 3: Sign Below		, There is n	o presum	ption of abu	se.	
•		umption of	abuse is o	determined i	by Form 1	22A-2.
By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.	rt 3: Sign Below					
	By signing here, I declare under penalty of perjury that the information on this state		n any atta	chments is	true and	corroct

Official Form 122A-1

**Christopher Davila** 

Debtor 1

#### Case 1-20-42860-nhl Doc 1 Filed 08/05/20 Entered 08/05/20 10:45:50

Debtor 1	Christopher Davila	Case number (if known)	
	Signature of Debtor 1		
Da	## August 5, 2020 ### MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	n.	

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court

			Eastern Distri	ct of New York	<b>K</b>		
In re	e Christopher [	Davila	Т	Debtor(s)	Case No. Chapter	7	
			1	Debtor(s)	Chapter		
	DIS	SCLOSURE O	F COMPENSATIO	N OF ATTOR	RNEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:						
	For legal service	ces, I have agreed to	accept		\$	2,000.00	
	Prior to the fili	ng of this statement	I have received		<u> </u>	2,000.00	
						0.00	
2.	\$ of the fi	ling fee has been pai	id.				
3.	The source of the compensation paid to me was:						
	Debtor	☐ Other (speci	fy):				
4.	The source of comp	ensation to be paid to	o me is:				
	Debtor	☐ Other (speci	fy):				
5.	■ I have not agree	d to share the above	disalosed componention with	h any other person	unlass thay are mam	hars and associates of my law firm	
3.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm						
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.						
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	a. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;						
	reaffirma	ons with secured tion agreements a	creditors to reduce to n and applications as need of liens on household go	led; preparation	mption planning; and filing of moti	preparation and filing of ons pursuant to 11 USC	
7.	Represer	the debtor(s), the about the debter adversary proce		clude the following lity actions, judio	service: cial lien avoidance	es, relief from stay actions or	
			CERTIF	CATION			
	I certify that the forebankruptcy proceeding		statement of any agreement	or arrangement for	payment to me for re	epresentation of the debtor(s) in	
	August 5, 2020			s/ Jesus J. Pena			
Date				Jesus J. Pena Signature of Attorney			
			P	eña & kahn, PLL	.C.		
				8-19 Roosevelt <i>I</i> nd Floor	Avenue		
				nd Floor ackson Heights,	NY 11372		
			7	18-779-6961 Fa	x: 718-779-6865		
				suarez@penaka 'ame of law firm	hn.com		
			TV	une oj iuw jiim			

## **United States Bankruptcy Court Eastern District of New York**

In re	Christopher Davila	Case No.		
		Debtor(s)	Chapter	7

### **VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

718-779-6961 Fax: 718-779-6865

USBC-44 Rev. 9/17/98

American Honda Finance Attn: National Bankruptcy Center Po Box 166469 Irving, TX 75016

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Citibank Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179

Citibankna Citicorp Credit Srvs/Centralized Bk dept Po Box 790034 St Louis, MO 63179

Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

Department of Education/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Deptartment Store National Bank/Macy's Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

ECMC Attn: Bankruptcy 111 Washington Ave South, Ste 1400 Minneapolis, MN 55401

Eos Cca Attn: Bankruptcy 700 Longwater Dr Norwell, MA 02061

Fingerhut Attn: Bankruptcy Po Box 1250 Saint Cloud, MN 56395

LendingClub Attn: Bankruptcy 595 Market St, Ste 200 San Francisco, CA 94105

Municipal Credit Union Attn: Bankruptcy Po Box 3205 New York, NY 10007

Navient Attn: Bankruptcy Po Box 9640 Wiles-Barr, PA 18773

Portfolio Recovery Attn: Bankruptcy 120 Corporate Blvd Norfold, VA 23502

Prosper Funding LLC 221 Main Street Suite 300 San Francisco, CA 94105 Syncb/PPC Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Td Auto Finance Attn: Bankruptcy Dept Po Box 9223 Farmington Hills, MI 48333

Toyota Financial Services Attn: Bankruptcy Dept Po Box 8026 Cedar Rapids, IA 52409

USDOE/GLELSI Attn: Bankruptcy Po Box 7860 Madison, WI 53707

Volkswagen Credit, Inc Attn: Bankruptcy Po Box 3 Hillboro, OR 97123

Wells Fargo/Bob's Discount Furniture Po Box 10438 Mac F8235-02f Des Moines, IA 50306 Case 1-20-42860-nhl Doc 1 Filed 08/05/20 Entered 08/05/20 10:45:50

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

# STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

CASE NO.:.

Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:					
[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]					
NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.					
☐ THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:					
1. CASE NO.: JUDGE: DISTRICT/DIVISION:					
CASE STILL PENDING (Y/N): [If closed] Date of closing:					
CURRENT STATUS OF RELATED CASE:(Discharged/awaiting discharge, confirmed, dismissed, etc.)					
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):					
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:					
2. CASE NO.: JUDGE: DISTRICT/DIVISION:					
CASE STILL PENDING (Y/N): [If closed] Date of closing:					
CURRENT STATUS OF RELATED CASE:  (Discharged/awaiting discharge, confirmed, dismissed, etc.)					
(Discharged/awaiting discharge, confirmed, dismissed, etc.)					
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):					
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:					
3. CASE NO.: JUDGE: DISTRICT/DIVISION:					
CASE STILL PENDING (Y/N): [If closed] Date of closing:					

**DEBTOR(S):** Christopher Davila

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer	to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE SCHEDULE "A" OF RELATED CASE:	E "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
	s who have had prior cases dismissed within the preceding 180 days may not ired to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S A	ITORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Y	/ork (Y/N): <b>Y</b>
CERTIFICATION (to be signed by pro se debtor/petition.) I certify under penalty of perjury that the within bankrupt as indicated elsewhere on this form.	cy case is not related to any case now pending or pending at any time, except
/s/ Jesus J. Pena Jesus J. Pena	
Signature of Debtor's Attorney Peña & kahn, PLLC. 88-19 Roosevelt Avenue	Signature of Pro Se Debtor/Petitioner
2nd Floor Jackson Heights, NY 11372 718-779-6961 Fax:718-779-6865	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009